

Brian P. Kemp Secretary of State

Professional Licensing Boards and Securities Division 237 Coliseum Drive Macon, GA 31217-3858 (478) 207-2440 http://www.sos.ga.gov

Shawnzia Thomas Division Director

Georgia Charitable Solicitations Act Charitable Organization Registration

EXECUTION PAGE						
Statutory Fees (Nonrefundable)						
Make Check Payable	Make Check Payable to Georgia Secretary of State					
INITIAL APPLICATION \$35.00	AMENDMENT (No Fee Required)	REINSTATEMENT Registration #: \$35.00				
WARNING: Failure to keep this form current and file accurate supplemental information on a timely basis, or failure to keep accurate books and records or otherwise comply with provisions of the Georgia Charitable Solicitations Act of 1988, is a violation of said Act and may result in disciplinary, administrative, injunctive or criminal action. INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACT MAY CONSTITUTE CRIMINAL VIOLATIONS. All sections must be completed. If something does not apply please list N/A for not applicable, unless otherwise noted.						
Official Name:						
Address of Applicant (Charitable Organization):	Mailing Addres	s (if different):				
2. Other Names under which solicitations will be ma	ade:					
3. Contact Person:		Telephone:				
Contact Person Email Address for Official Correspondence	ndence:					
4. Location of Books and Records:						
EXECUTION: On behalf of the applicant identified above, for the purpose of complying with the Charitable Solicitations Act of 1988, as amended (O. C. G. A. 43-17-1 et seq.) ("Act"), I hereby certify that the applicant is in compliance with said Act and irrevocably appoints the Secretary of State of the State of Georgia the agent for the applicant upon whom may be served any notice, process or pleading in any action or proceeding against the applicant arising out of, or founded upon, a violation or an alleged violation of said Act. The applicant hereby consents that any such action or proceeding against said applicant may be commenced in any court of competent jurisdiction and proper venue within the State of Georgia by service of process upon Secretary of State with the same effect as if the applicant was a resident of the State of Georgia and had been personally served with process. The undersigned hereby verifies that he had executed this form on behalf of, and with the authority of, said applicant. The undersigned and applicant represent that the information and statements contained herein, including the exhibits attached hereto, and other information filed herewith, all of which are made a part hereof, are current, true and complete. The undersigned and applicant further represent that to the extent any information previously submitted is not amended, such information is currently accurate and complete.						
Name of authorized Executive Officer (please type or print):		Date:				
Signature of Executive Officer:	Title:					
Official Witness (Notary)	1					
THIS PAGE MUST ALWAYS BE COMPLETED IN FULL with original manual signature and						
notarization with seal. To amend, circle numbers identifying the guestions and provide ex	` ,	To explain answers attach additional				

APP	LICA	NT'S	NAME	•											
To amend, circle numbers being amended and file with a completed execution page (C100 page 1)															
5. St	5. Status of registration in other jurisdictions Enter "1" for pending registrations, "2" if already registered, and leave blank if not registered.														
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	LA		MA	MD		ME		MI		MN		МО		MS	MT
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6. Fis	scal Ye	ear End	ls on (M	onth/Day):		Date o	of Form	nation:				Place	e of Fi	iling:	
7. A	pplica	ant is	a:			Corp	oratio	n			Proprietorship				
		nershi					ed Lial		ompa	ıny	Other:				
8. If	FORE	GN Co	rporati	on, date quali	ified to	transac	ct busin	ess in	Georg	jia:					
 9. The following financial information must accompany the application in order for registration to become effective: A signed IRS Form 990 or 990 E-Z dated within one year of filing AND one of the following types of financial statements dated within one year of filing: a. Organizations that received or collected more than \$1,000,000 in the preceding fiscal year must submit a financial statement certified by an independent certified public accountant. b. Organizations that received or collected more than \$500,000 but less than \$1,000,000 must submit a financial statement reviewed by an independent certified public accountant c. Organizations that received or collected less than \$500,000 must submit a financial statement. The financial statement does not have to be reviewed or certified. d. If no funds have been received or collected, attach a signed statement to that effect. Please note: Applications for reinstatement must submit two years of prior financial statements and IRS Form 990. 10. State the general purpose for which the charitable organization is organized (attach additional sheets if necessary): 															
11. 5	Specify	the pu	rpose o	r object for wh							addition	al sheet	ts if ne	ecessarv):
 11. Specify the purpose or object for which funds solicited will be used (attach additional sheets if necessary): 12a. Specify the method(s) of solicitation: 12b. Specify the period of solicitation: 															

13. Does the charitable organization have a contract with a fund raising counsel or paid solicitor to solici in Georgia?	t contri Yes	butions No			
f the answer to the above question is yes: a) list the name and address of the fund raising counsel or paid solicitor to be used in connection with the solicitations n Georgia:					
(b) Terms of remuneration for paid solicitor:					
(c) Is the paid solicitor registered with the Secretary of State to solicit contributions in Georgia?	Yes	No			
BACKGROUND INFORMATION					
To amend, circle questions being amended and file with a completed Execution page (C100 page 1) NOTE: (1) For the purpose of the following questions the term "executive officer" means the chief executive of president, the principal financial officer, the principal operation officer, each vice president with involving policy-making, the treasurer or any other person performing similar functions. (2) All YES answers to questions must be fully explained. Attach additional sheets as needed. You must also complete page 6 of this form.	respon	sibility			
14. In the past ten years has the applicant, executive officer, or control person been convicted of or pled guilty	YES	NO			
or nolo contendere (no contest) to a felony or misdemeanor which: (a) Involves the solicitation or acceptance of charitable contributions or the making of a false oath, the making of a false report, bribery, perjury, burglary, or conspiracy to commit any of the foregoing offenses? (b) Arises out of the conduct of solicitation of contributions for a charitable organization?					
(c) Involves the larceny, theft, robbery, extortion, forgery, counterfeiting, fraudulent concealment, embezzlement, fraudulent conversion, or misappropriation of funds?(d) Involves murder or rape?					
(e) Involves assault or battery if such person proposes to be engaged in counseling, advising, housing, or sheltering individuals? Or					
(f) Pled guilty or nolo contendere (no contest) to any other felony offense?					
15. Has any court:					
(a) in the past ten years enjoined the applicant or an executive officer in connection with any aspect of the fundraising business?					
(b) ever found that the applicant or executive officer was involved in a violation of any state or federal law regarding fundraising or any other deceptive practice?					
16. Has any local, state or federal government agency:(a) ever found the applicant or executive officer to have made a false statement or omission or been dishonest, unfair or unethical?					
(b) ever found the applicant or executive officer to have been involved in a violation of a fundraising law?(c) ever found the applicant or executive officer to have been a cause of any fundraising organization having					
its authorization to do business denied, suspended, revoked or restricted?(d) in the past ten years entered an order or consent order against the applicant or an executive officer in connection with any fundraising statute or deceptive practices?					
(e) ever denied, suspended, or revoked the applicant's or an executive officer's registration or license, prevented it from association with a fundraising organization, or otherwise disciplined it by restricting its activities?					
(f) ever revoked or suspended the applicant's or an executive officer's license as an attorney or accountant?					
17. Is the applicant or executive officer now the subject of any proceeding that could result in a yes answer to any question contained herein?					
18. Does the applicant have any unsatisfied judgments or liens against it or has it filed for any type bankruptcy?					
19. Has any governmental agency, including the United States Internal Revenue Service determined that the organization is tax exempt? If yes, attach copy of determination letter. If applicable, indicate employer identification number here:					
20. Has a tax exemption status been denied or cancelled at any time by any governmental agency or official?					

List the name and address of each affiliated branch or chapter located within the State of Georgia and the directors of each such branch or chapter. Attach additional sheets as needed. Name Address Director(s) Name Address Director(s) Name Address Director(s) Address Name Director(s) Address Director(s) Name OTHER OFFICERS, DIRECTORS AND TRUSTEES List the names and address of all officers, directors, and trustees Attach additional sheets as needed. Address Title Name Title Name Address Address Title Name Name Address Title Name Address Title

ACKNOWLEDGEMENTS

By submitting this application, the applicant acknowledges the following statutory requirements:

- (a) SOLICITATION CONTRACT REQUIRED. [OCGA 43-17-3(e)(1)] There must be a written contract between the charitable organization and paid solicitor.
- (b) SOLICITATION NOTICE. [OCGA 43-17-3(f)] Paid solicitor must file a solicitation notice and a copy of each solicitation contract with the Secretary of State in order to commence a solicitation campaign in Georgia.
- (c) POINT OF SOLICITATION DISCLOSURE. [OCGA 43-17-8] Every charitable organization, paid solicitor, or solicitor agent required to be registered under this Code section, at the time of any solicitation that occurs in or from this state, shall include the following disclosures: (1) The name and location of the paid solicitor and solicitor agent, if any; (2) The name and location of the charitable organization for which the solicitation is being made; (3) That the following information will be sent upon request: (A) A full and fair description of the charitable program for which the solicitation campaign is being carried out and, if different, a full and fair description of the programs and activities of the charitable organization on whose behalf the solicitation is being carried out; and (B) A financial statement or summary which shall be consistent with the financial statement required to be filed with the Secretary of State pursuant to Code Section 43-17-5; and (4) If made by a solicitor agent or paid solicitor, that the solicitation is being made by a paid solicitor on behalf of the charitable organization and not by a volunteer and inform the person being solicited that the contract disclosing the financial arrangements between the paid solicitor and the charity is on file with and available from the Secretary of State.
- (d) ACCOUNTING TO CHARITABLE ORGANIZATION. [OCGA 43-17-3(g)] Within 90 days after a solicitation campaign has been completed, and on the anniversary of the commencement of a solicitation campaign lasting more than one year, the paid solicitor shall account in writing to the charitable organization with whom it has contracted and to the Secretary of State, for all contributions received and expenses paid. The accounting shall be in the form of a written report, submitted to the charitable organization and to the Secretary of State, and shall be retained by the charitable organization for three years.
- (e) COLLECTIONS AND DEPOSITS. [OCGA 43-17-3(h)] Each monetary contribution received by the paid solicitor shall, in its entirety and within three business days of its receipt, be deposited in an account at a federally insured financial institution. The account shall be in the name of the charitable organization with whom the paid solicitor has contracted and the charitable organization shall have sole control of all withdrawals from the account.
- (f) EXPIRATION. [OCGA 43-17-5(b)(9)] Registration as a charitable organization, if granted, shall be valid for a period of 24 months, and if not renewed shall expire without further notice to the applicant.
- (g) COMMERCIAL CO-VENTURERS. [OCGA 43-17-6] Every charitable organization which agrees to permit a charitable sales promotion shall obtain, prior to the commencement of the sales promotion, a written agreement from the commercial coventurer, signed by the charity and the commercial coventurer.
- (h) AMENDMENTS TO REGISTRATION. [OCGA 43-17-5(b)(5)] Registration must be current and up to date at all times and must be amended within 30 days to reflect any material changes in operations of the charitable organization.
- (i) RECORDS. [OCGA 43-17-5(d)] Records must be prepared and maintained for no less than three years and be available for inspection by representatives of the Secretary of State.
- (j) MISAPPROPRIATION OF FUNDS AND FRAUDULENT CONDUCT. [OCGA 43-17-12] The Georgia Charitable Solicitations Act of 1988, as amended O.C.G.A. 43-17-1 et seq. ("Act"), establishes that it is a felony to engage in fraudulent conduct or to misappropriate, convert or illegally withhold contributions collected pursuant to the Act.

APPLICANT'S NAME:						
CON	TROL PERSONS					
	ction of the management and po	licies of the applicant. icer or person holding				
Name:	Title:					
Address:	I					
City:	State:	Zip Code:				
Date of Birth:	Social Security No	umber:				
The person named above MUST provide a <u>ten year employment history</u> beginning with the most recent employment. Attach separate sheets if needed.						
All persons who have custody of charitable donations must submit to a criminal background check. By signing this form, the person named above authorizes the Secretary of State to conduct a criminal history check pursuant to the charitable organization's registration in the State of Georgia.						
Signature of Control Person						
This	Day of					
Official Witness (Notary)	Signature					

Georgia Bureau of Investigation Georgia Crime Information Center

Consent Form

I hereby authorize the <u>Office of Secretary of State – Charities Division</u> to receive any Georgia criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

Full Name	e (print)		
Address			
Sex	Race	Date of Birth	Social Security Number
Signature			
Date			
Emplo Employ Emplo	yment with mer ment with elde yment with child yment with crim	visions (check if applicable ntally disabled (Purpose co r care (Purpose code 'N') dren (Purpose code 'W') ninal justice agency – civilia ninal justice agency – P.O.	ode 'M')
One of th	e following m	ust be checked:	
		•	cle one) days from date of signature give consent to the above named to as for the duration of my employment with this compar

AFFIDAVIT OF APPLICANT

I certify and declare that I am of good moral character and that all information contained in this application is true and correct, to the best of my knowledge. I understand that any willful omission or falsification of pertinent information required in the application is justification for the denial, suspension, or revocation of my registration by the Commission. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia Charitable Organization Regulatory Commission and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, I hereby accurate pursuant to O.C.G.A. § 50-36-1:	swear and affirm one of the follo	owing to be true and
1) I am a United States citizen 18 years of age o Verifiable Document(s) such as driver's license, passport, or do		
2) I am not a United States citizen, but I am a le age or older, or I am a qualified alien or non-immigrant under the age or older with an alien number issued by the Department of I Please submit a copy of your current immigration document(s) vnumber and, if needed, SEVIS number.	ne Federal Immigration and Nation Homeland Security or other federa	nality Act 18 years of al immigration agency.
I also understand that if I have made a false statement on the apple felony and have not had all of my civil rights restored pursuant registration without a prior hearing. I shall be entitled to a h	to the law, the Commission may	suspend my
I understand that I must maintain the records required by the Coinspection by the Georgia Charitable Organization Regulatory Oduring normal business hours.		
In making the above attestation, I understand that any failure to disciplinary action by the Georgia Charitable Organization Regu		•
Signature of Applicant Date		
Print Applicant's Name		
Personally appeared before me, the undersigned official authori	zed to administer oaths, comes	
who deposes and swears (Applicant's Name) application for a license by examination for Charitable Organiza statements	that he/she is the person who exe	
herein contained are true to the best of his/her knowledge and be	elief.	
Sworn to and subscribed before me this day of	, 2	
Notary Public Signature	County	State
My Commission Expires		
(Seal)		

APPLICANT: PLEASE CHECK THE FORM OF IDENTIFICATION BELOW THAT YOU POSSESS. RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.

Name
Secure and Verifiable Documents Under O.C.G.A. § 50-36-2 Issued August 1, 2011 by the Office of the Attorney General, Georgia
The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA") provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.
The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.
A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A tribal identification card of a federally recognized Native American tribe, provided thatit contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast G	uard
[O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]	
A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]	
A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]	
A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. §50-36-2(b)(3) § 41.2]); 22 CFR
A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 27	74a.2]
A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Set (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]	ervices
A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]	on
In addition to the documents listed herein, if, in administering a public benefit or program, an agency is by federal law to accept a document or other form of identification for proof of or documentation of i that document or other form of identification will be deemed a secure and verifiable document solely particular program or administration of that particular public benefit. [O.C.G.A. § secure and 50-36-2	dentity, for that